

Fill in this information to identify your case and this filing:

Debtor 1	Carlos	Dejuan	Baker
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	Gay	Avery	Baker
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Northern		District of Texas	
Case number 24-44095-MXM-13			

Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

No. Go to Part 2.

Yes. Where is the property?

1.1 Single Family Residence

Street address, if available, or other description

1401 Hackney Dr

Mansfield, TX 76063

City State ZIP Code

Johnson

County

What is the property? Check all that apply.

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

\$1,024,190.00

Current value of the portion you own?

\$1,024,190.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Fee Simple

Check if this is community property (see instructions)

Who has an interest in the property? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: R000102365

Source of Value: Johnson CAD

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here →

\$1,024,190.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

No

Yes

3.1	Make: <u>Honda</u>	Who has an interest in the property? Check one.	Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D: Creditors Who Have Claims Secured by Property</i> .	
	Model: <u>Accord Sport</u>	<input type="checkbox"/> Debtor 1 only	Current value of the entire property?	Current value of the portion you own?
	Year: <u>2022</u>	<input type="checkbox"/> Debtor 2 only	<u>\$24,850.00</u>	<u>\$24,850.00</u>
	Approximate mileage: _____	<input checked="" type="checkbox"/> Check if this is community property (see instructions)		
	Other information:			
	Source of Value: KBB VIN: 1HGCV2F30NA013832			
If you own or have more than one, describe here:				
3.2	Make: <u>Nissan</u>	Who has an interest in the property? Check one.	Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D: Creditors Who Have Claims Secured by Property</i> .	
	Model: <u>Armada SL</u>	<input type="checkbox"/> Debtor 1 only	Current value of the entire property?	Current value of the portion you own?
	Year: <u>2022</u>	<input type="checkbox"/> Debtor 2 only	<u>\$33,550.00</u>	<u>\$33,550.00</u>
	Approximate mileage: _____	<input checked="" type="checkbox"/> Check if this is community property (see instructions)		
	Other information:			
	Source of Value: KBB VIN: JN8AY2BA3N9391182			
3.3	Make: <u>Mercedes-Benz</u>	Who has an interest in the property? Check one.	Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D: Creditors Who Have Claims Secured by Property</i> .	
	Model: <u>S560</u>	<input type="checkbox"/> Debtor 1 only	Current value of the entire property?	Current value of the portion you own?
	Year: <u>2020</u>	<input type="checkbox"/> Debtor 2 only	<u>\$48,025.00</u>	<u>\$48,025.00</u>
	Approximate mileage: _____	<input checked="" type="checkbox"/> Check if this is community property (see instructions)		
	Other information:			
	Source of Value: KBB VIN: WDDUG8DBXLA522355			
3.4	Make: <u>Mercedes-Benz</u>	Who has an interest in the property? Check one.	Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D: Creditors Who Have Claims Secured by Property</i> .	
	Model: <u>GLE 350 4Matic</u>	<input type="checkbox"/> Debtor 1 only	Current value of the entire property?	Current value of the portion you own?
	Year: <u>2024</u>	<input type="checkbox"/> Debtor 2 only	<u>\$65,883.00</u>	<u>\$65,883.00</u>
	Approximate mileage: _____	<input checked="" type="checkbox"/> Check if this is community property (see instructions)		
	Other information:			
	Source of Value: KBB VIN: 4JGFB4FB8RB041803			

3.5	Make: <u>Toyota</u>	Who has an interest in the property? Check one.	Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D: Creditors Who Have Claims Secured by Property</i> .	
	Model: <u>Camry</u>	<input type="checkbox"/> Debtor 1 only		
	Year: <u>2007</u>	<input type="checkbox"/> Debtor 2 only		
	Approximate mileage: _____	<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only		
		<input type="checkbox"/> At least one of the debtors and another		
	Other information:	<input checked="" type="checkbox"/> Check if this is community property (see instructions)	Current value of the entire property? <u>\$3,650.00</u>	Current value of the portion you own? <u>\$3,650.00</u>
	VIN: 4T1BE46K37U587013			

4. **Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories***Examples:* Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

No
 Yes

4.1	Make: _____	Who has an interest in the property? Check one.	Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D: Creditors Who Have Claims Secured by Property</i> .	
	Model: _____	<input type="checkbox"/> Debtor 1 only		
	Year: _____	<input type="checkbox"/> Debtor 2 only		
	Other information:	<input type="checkbox"/> Debtor 1 and Debtor 2 only		
		<input type="checkbox"/> At least one of the debtors and another		
		<input checked="" type="checkbox"/> Check if this is community property (see instructions)	Current value of the entire property? _____	Current value of the portion you own? _____
	 			

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here →

\$175,958.00

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
 Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

No
 Yes. Describe.

See Attached.**\$4,962.96**

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

No
 Yes. Describe.

Electronics**\$1,200.00**

8. **Collectibles of value**

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

 No Yes. Describe.**Artwork****\$3,000.00**9. **Equipment for sports and hobbies**

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

 No Yes. Describe.**Exercise Equipment****\$250.00**10. **Firearms**

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

 No Yes. Describe.**2 Firearms****\$500.00**11. **Clothes**

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

 No Yes. Describe.**Clothes****\$50.00**12. **Jewelry**

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

 No Yes. Describe.13. **Non-farm animals**

Examples: Dogs, cats, birds, horses

 No Yes. Describe.14. **Any other personal and household items you did not already list, including any health aids you did not list** No Yes. Give specific information.15. **Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here** →**\$9,962.96**

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16. Cash	<i>Examples:</i> Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition	
<input checked="" type="checkbox"/> No		
<input type="checkbox"/> Yes	Cash:
17. Deposits of money	<i>Examples:</i> Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.	
<input type="checkbox"/> No		
<input checked="" type="checkbox"/> Yes	Institution name:	
	17.1. Checking account:	CNB of TX \$397.90
18. Bonds, mutual funds, or publicly traded stocks	<i>Examples:</i> Bond funds, investment accounts with brokerage firms, money market accounts	
<input checked="" type="checkbox"/> No		
<input type="checkbox"/> Yes	Institution or issuer name:	
	
	
	
19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture		
<input checked="" type="checkbox"/> No		
<input type="checkbox"/> Yes. Give specific information about them.....	Name of entity:	% of ownership:
	
	
	
20. Government and corporate bonds and other negotiable and non-negotiable instruments	<i>Negotiable instruments</i> include personal checks, cashiers' checks, promissory notes, and money orders. <i>Non-negotiable instruments</i> are those you cannot transfer to someone by signing or delivering them.	
<input checked="" type="checkbox"/> No		
<input type="checkbox"/> Yes. Give specific information about them.....	Issuer name:	
	
	
	

21. Retirement or pension accounts*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No Yes. List each account separately. Type of account: Institution name:

401(k) or similar plan: _____

Pension plan: _____

IRA: _____

Retirement account: _____

Keogh: _____

Additional account: _____

Additional account: _____

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Yes Institution name or individual:

Electric: _____

Gas: _____

Heating oil: _____

Security deposit on rental unit: _____

Prepaid rent: _____

Telephone: _____

Water: _____

Rented furniture: _____

Other: _____

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Yes Issuer name and description:_____

24. **Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

No

Yes Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

25. **Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**

No

Yes. Give specific information about them.

26. **Patents, copyrights, trademarks, trade secrets, and other intellectual property**

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

No

Yes. Give specific information about them.

27. **Licenses, franchises, and other general intangibles**

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

No

Yes. Give specific information about them.

Money or property owed to you?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

28. **Tax refunds owed to you**

No

Yes. Give specific information about them, including whether you already filed the returns and the tax years.

Federal: _____

State: _____

Local: _____

29. **Family support**

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

No Yes. Give specific information.

Alimony:

Maintenance:

Support:

Divorce settlement:

Property settlement:

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

 No Yes. Give specific information.
31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

 No Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund value:

College Policy**\$0.00****32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

 No Yes. Give specific information.
33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

 No Yes. Describe each claim.
34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No Yes. Describe each claim.
35. Any financial assets you did not already list No Yes. Give specific information.
36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here**\$397.90**

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

No. Go to Part 6.
 Yes. Go to line 38.

Current value of the portion you own?
Do not deduct secured claims or exemptions.

38. Accounts receivable or commissions you already earned

No
 Yes. Describe.

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39. Office equipment, furnishings, and supplies

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

No
 Yes. Describe.

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40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade

No
 Yes. Describe.

--	--

41. Inventory

No
 Yes. Describe.

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42. Interests in partnerships or joint ventures

No
 Yes. Describe.

Name of entity:

% of ownership:

_____	_____	_____
_____	_____	_____
_____	_____	_____

43. Customer lists, mailing lists, or other compilations

No
 Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?
 No
 Yes. Describe.

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51. Any farm- and commercial fishing-related property you did not already list

 No Yes. Give specific information.

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52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here



\$0.00

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

 No Yes. Give specific information.

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54. Add the dollar value of all of your entries from Part 7. Write that number here



\$0.00

Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2	→	\$1,024,190.00
56. Part 2: Total vehicles, line 5		<u>\$175,958.00</u>
57. Part 3: Total personal and household items, line 15		<u>\$9,962.96</u>
58. Part 4: Total financial assets, line 36		<u>\$397.90</u>
59. Part 5: Total business-related property, line 45		<u>\$0.00</u>
60. Part 6: Total farm- and fishing-related property, line 52		<u>\$0.00</u>
61. Part 7: Total other property not listed, line 54	+	<u>\$0.00</u>
62. Total personal property. Add lines 56 through 61.		<u>\$186,318.86</u>
		Copy personal property total →
63. Total of all property on Schedule A/B. Add line 55 + line 62.	+	<u>\$186,318.86</u>
		<u>\$1,210,508.86</u>

Continuation Page

6.	Household goods and furnishings	
	<u>Furniture</u>	<u>\$800.00</u>
	<u>Kitchen Items</u>	<u>\$900.00</u>
	<u>NFM-Household goods and furnishings</u>	<u>\$3,262.96</u>

Fill in this information to identify your case:

Debtor 1	Carlos	Dejuan	Baker
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	Gay	Avery	Baker
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		Northern	District of Texas
Case number 24-44095-MXM-13 (if known)			

Check if this is an amended filing

Official Form 106CSchedule C: The Property You Claim as Exempt

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim <i>Check only one box for each exemption.</i>	Specific laws that allow exemption
Brief description: 1401 Hackney Dr Mansfield, TX 76063	Current value of the portion you own Copy the value from <i>Schedule A/B</i>	Amount of the exemption you claim <input checked="" type="checkbox"/> \$421,837.27 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Specific laws that allow exemption <u>Const. art. 16 §§ 50, 51, Texas Prop. Code §§ 41.001-.002</u>
Line from <i>Schedule A/B</i> : <u>1.1</u>			
3. Are you claiming a homestead exemption of more than \$189,050? (Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.)			
<p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?</p> <p><input type="checkbox"/> No <input checked="" type="checkbox"/> Yes</p>			

Debtor 1

Carlos Dejuan Baker

Debtor 2

Gay Avery Baker

Case number (if known) 24-44095-MXM-13

First Name Middle Name Last Name

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
Brief description: <u>2007 Toyota Camry</u> VIN: <u>4T1BE46K37U587013</u>	<u>\$3,650.00</u>	<input checked="" type="checkbox"/> <u>\$2,650.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(9)</u>
Line from Schedule A/B: <u>3.5</u>			
Brief description: <u>Furniture</u>	<u>\$800.00</u>	<input checked="" type="checkbox"/> <u>\$800.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)</u>
Line from Schedule A/B: <u>6</u>			
Brief description: <u>Kitchen Items</u>	<u>\$900.00</u>	<input checked="" type="checkbox"/> <u>\$900.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)</u>
Line from Schedule A/B: <u>6</u>			
Brief description: <u>NFM-Household goods and furnishings</u>	<u>\$3,262.96</u>	<input checked="" type="checkbox"/> <u>\$0.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)</u>
Line from Schedule A/B: <u>6</u>			
Brief description: <u>Electronics</u>	<u>\$1,200.00</u>	<input checked="" type="checkbox"/> <u>\$1,200.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)</u>
Line from Schedule A/B: <u>7</u>			
Brief description: <u>Artwork</u>	<u>\$3,000.00</u>	<input checked="" type="checkbox"/> <u>\$3,000.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)</u>
Line from Schedule A/B: <u>8</u>			
Brief description: <u>Exercise Equipment</u>	<u>\$250.00</u>	<input checked="" type="checkbox"/> <u>\$250.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(8)</u>
Line from Schedule A/B: <u>9</u>			

Debtor 1

CarlosDejuanBaker

Debtor 2

GayAveryBaker

First Name

Middle Name

Last Name

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
Brief description:	<u>2 Firearms</u>	<u>\$500.00</u>	<input checked="" type="checkbox"/> <u>\$500.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(7)</u>
Line from Schedule A/B:	<u>10</u>			
Brief description:	<u>Clothes</u>	<u>\$50.00</u>	<input checked="" type="checkbox"/> <u>\$50.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(5)</u>
Line from Schedule A/B:	<u>11</u>			

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF TEXAS
FORT WORTH DIVISION**

IN RE: **Baker, Carlos Dejuan**
Baker, Gay Avery

CASE NO **24-44095-MXM-13**
CHAPTER 13

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Exemption Totals by Category:

(Values and liens of surrendered property are NOT included in this section)

Scheme Selected: **State**

No.	Category	Gross Property Value	Total Encumbrances	Total Equity	Total Amount Exempt	Total Amount Non-Exempt
1.	Real Estate	\$1,024,190.00	\$602,352.73	\$421,837.27	\$421,837.27	\$0.00
3.	Motor vehicle	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
4.	Watercraft, trailers, motors homes, and accessories	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
6.	Household goods and furnishings	\$1,700.00	\$0.00	\$1,700.00	\$1,700.00	\$0.00
7.	Electronics	\$1,200.00	\$0.00	\$1,200.00	\$1,200.00	\$0.00
8.	Collectibles of value	\$3,000.00	\$0.00	\$3,000.00	\$3,000.00	\$0.00
9.	Equipment for sports and hobbies	\$250.00	\$0.00	\$250.00	\$250.00	\$0.00
10.	Firearms	\$500.00	\$0.00	\$500.00	\$500.00	\$0.00
11.	Clothes	\$50.00	\$0.00	\$50.00	\$50.00	\$0.00
12.	Jewelry	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
13.	Nonfarm animals	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
14.	Other	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
16.	Cash	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
17.	Deposits of money	\$397.90	\$0.00	\$397.90	\$0.00	\$397.90
18.	Bonds, mutual funds, or publicly traded stocks	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
19.	Business Interests, LLC's, Partnerships, Joint Ventures and Nonpublicly traded stock	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
20.	Bonds and other financial instruments	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
21.	Retirement or pension accounts	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
22.	Security deposits and prepayments	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
23.	Annuities	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
24.	Interest in a qualified education fund, such as an education IRA	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
25.	Trusts, equitable or future interests in property	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF TEXAS
FORT WORTH DIVISION**

IN RE: **Baker, Carlos Dejuan**
Baker, Gay Avery

CASE NO **24-44095-MXM-13**
CHAPTER 13

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet #1

Exemption Totals by Category:

(Values and liens of surrendered property are NOT included in this section)

Scheme Selected: **State**

No.	Category	Gross Property Value	Total Encumbrances	Total Equity	Total Amount Exempt	Total Amount Non-Exempt
26.	Copyrights, trademarks, websites and other intellectual property	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
27.	Licenses, Franchises, and other general intangibles	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
28.	Tax refunds	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
29.	Family support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
30.	Other amounts owed to the debtor	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
31.	Insurance policies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
32.	Interest in property from deceased	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
33.	Claims against third parties	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
34.	All other claims, includes contingent/unliquidated claims, counter claims, and creditor set offs	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
35.	Other financial asset	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
38.	Accounts receivable	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
39.	Office equipment, furnishings, and supplies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
40.	Machinery, fixtures and equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
41.	Inventory	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
42.	Interests in partnerships or joint ventures	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
43.	Customer lists	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
44.	Other businessrelated property	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
47.	Farm animals	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
48.	Crops	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
49.	Equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
50.	Supplies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF TEXAS
FORT WORTH DIVISION

IN RE: **Baker, Carlos Dejuan**
Baker, Gay Avery

CASE NO **24-44095-MXM-13**
CHAPTER **13**

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet #2

Exemption Totals by Category:

(Values and liens of surrendered property are NOT included in this section)

Scheme Selected: **State**

No.	Category	Gross Property Value	Total Encumbrances	Total Equity	Total Amount Exempt	Total Amount Non-Exempt
51.	Other farm or fishing related property	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
53.	Other	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
TOTALS:		\$1,031,287.90	\$602,352.73	\$428,935.17	\$428,537.27	\$397.90

UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF TEXAS
FORT WORTH DIVISION

IN RE: **Baker, Carlos Dejuan**
Baker, Gay Avery

CASE NO **24-44095-MXM-13**
CHAPTER **13**

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet #3

Surrendered Property:

The following property is to be surrendered by the debtor. Although this property is NOT exempt, it is NOT considered "non-exempt" for purposes of this analysis. The below listed items are to be returned to the lienholder

Property Description	Market Value	Lien	Equity
<u>Real Property</u>			
(None)			
<u>Personal Property</u>			
2022 Nissan Armada SL	\$33,550.00		\$33,550.00
2020 Mercedes-Benz S560	\$48,025.00		\$48,025.00
2024 Mercedes-Benz GLE 350 4Matic	\$65,883.00		\$65,883.00
TOTALS:	\$147,458.00	\$0.00	\$147,458.00

Non-exempt Property by Item:

The following property, or a portion thereof, is non-exempt.

Property Description	Market Value	Lien	Equity	Non-Exempt Amount
<u>Real Property</u>				
(None)				
<u>Personal Property</u>				
CNB of TX	\$397.90	\$0.00	\$397.90	\$397.90
Checking account				
TOTALS:	\$1,031,287.90	\$602,352.73	\$428,935.17	\$397.90

UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF TEXAS
FORT WORTH DIVISION

IN RE: **Baker, Carlos Dejuan**
Baker, Gay Avery

CASE NO **24-44095-MXM-13**
CHAPTER 13

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet #4

Summary	
A. Gross Property Value (not including surrendered property)	\$1,031,287.90
B. Gross Property Value of Surrendered Property	\$147,458.00
C. Total Gross Property Value (A+B)	\$1,178,745.90
D. Gross Amount of Encumbrances (not including surrendered property)	\$602,352.73
E. Gross Amount of Encumbrances on Surrendered Property	\$0.00
F. Total Gross Encumbrances (D+E)	\$602,352.73
G. Total Equity (not including surrendered property) / (A-D)	\$428,935.17
H. Total Equity in surrendered items (B-E)	\$147,458.00
I. Total Equity (C-F)	\$576,393.17
J. Total Exemptions Claimed	\$428,537.27
K. Total Non-Exempt Property Remaining (G-J)	\$397.90

Fill in this information to identify your case:

Debtor 1	Carlos First Name	Dejuan Middle Name	Baker Last Name
Debtor 2 (Spouse, if filing)	Gay First Name	Avery Middle Name	Baker Last Name
United States Bankruptcy Court for the: Northern		District of Texas	
Case number (if known) 24-44095-MXM-13			

Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2.	List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any	
2.1	Ally Financial, Inc Creditor's Name Attn: Bankruptcy 500 Woodard Ave Number Street Detroit, MI 48226 City State ZIP Code	Describe the property that secures the claim: 2022 Honda Accord Sport	\$40,808.67	\$24,850.00	\$15,958.67
		As of the date you file, the claim is: Check all that apply.			
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
		Nature of lien. Check all that apply.			
		<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt			
		<input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset)			
		Date debt was incurred 7/1/2022 Last 4 digits of account number 5 8 9 3			
		Remarks: In Plan			
		Add the dollar value of your entries in Column A on this page. Write that number here: \$40,808.67			

Debtor 1

Carlos Dejuan Baker

Debtor 2

Gay Avery Baker

First Name Middle Name Last Name

Case number (if known) 24-44095-MXM-13

Part 1:

Additional Page

After listing any entries on this page, number them beginning with 2.3,
followed by 2.4, and so forth.

Column A	Column B	Column C
Amount of claim	Value of collateral that supports this claim	Unsecured portion
Do not deduct the value of collateral.		If any

2.2 Chase Mortgage Describe the property that secures the claim: \$565,409.00 \$1,024,190.00 \$0.00

Creditor's Name

Attn: Legal Correspondence Center**700 Kansas Ln Mail Code
LA4-7200**

Number Street

Monroe, LA 71203

City State ZIP Code

Who owes the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) _____

Date debt was incurred 7/1/2021 Last 4 digits of account number 5 0 7 0

Remarks: Post petition mortgage payments

Add the dollar value of your entries in Column A on this page. Write that number here: \$565,409.00If this is the last page of your form, add the dollar value totals from all pages.
Write that number here: _____

Debtor 1

Carlos Dejuan Baker

Debtor 2

Gay Avery Baker

First Name Middle Name Last Name

Part 1:	Additional Page After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.	Column A	Column B	Column C
		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any

2.2 Chase Mortgage (post petition arrearage) **Describe the property that secures the claim:** \$9,668.46 **\$1,024,190.00** **\$0.00**

Creditor's Name
Attn: Legal Correspondence Center
700 Kansas Ln Mail Code LA4-7200
Number Street
Monroe, LA 71203
City State ZIP Code

Who owes the debt? Check one.
 Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

Nature of lien. Check all that apply.
 An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) _____

Date debt was incurred 7/1/2021 Last 4 digits of account number 5 0 7 0

Remarks: Post petition mortgage payments

2.2 Chase Mortgage (arrearage) **Describe the property that secures the claim:** \$73,145.89 **\$1,024,190.00** **\$0.00**

Creditor's Name
Attn: Legal Correspondence Center
700 Kansas Ln Mail Code LA4-7200
Number Street
Monroe, LA 71203
City State ZIP Code

Who owes the debt? Check one.
 Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

Nature of lien. Check all that apply.
 An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) _____

Date debt was incurred 7/1/2021 Last 4 digits of account number 5 0 7 0

Remarks: Post petition mortgage payments

Add the dollar value of your entries in Column A on this page. Write that number here:	<u>\$0.00</u>
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:	<u> </u>

Debtor 1

Carlos Dejuan Baker

Debtor 2

Gay Avery Baker

First Name Middle Name Last Name

Part 1:	Additional Page			Column A	Column B	Column C	
	After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.			Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any	
<u>2.3</u>	Johnson County Tax Assessor			Describe the property that secures the claim:	<u>\$19,837.38</u>	<u>\$1,024,190.00</u>	<u>\$0.00</u>
<p>Creditor's Name PO Box 75</p> <p>Number Street Cleburne, TX 76033</p> <p>City State ZIP Code</p> <p>Who owes the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input checked="" type="checkbox"/> Check if this claim relates to a community debt</p>				<p>Single Family Residence 1401 Hackney Dr Mansfield, TX 76063</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply.</p> <p><input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset)</p>			
<p>Date debt was incurred <u>1/1/2024</u></p>				Last 4 digits of account number	<u>2</u> <u>3</u> <u>6</u> <u>5</u>		
<p>Remarks: Pay Direct</p>							
<u>2.4</u>	Mercedes - Benz Financial Services			Describe the property that secures the claim:	<u>\$77,574.73</u>	<u>\$65,883.00</u>	<u>\$11,691.73</u>
<p>Creditor's Name Attn: Bankruptcy</p> <p>Number Street Roanoke, TX 76262</p> <p>City State ZIP Code</p> <p>Who owes the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim relates to a community debt</p>				<p>2024 Mercedes-Benz GLE 350 4Matic</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply.</p> <p><input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset)</p>			
<p>Date debt was incurred <u>8/1/2023</u></p>				Last 4 digits of account number	<u>5</u> <u>0</u> <u>0</u> <u>1</u>		
<p>Remarks: Surrender</p>							
<p>Add the dollar value of your entries in Column A on this page. Write that number here: <u>\$97,412.11</u></p>							
<p>If this is the last page of your form, add the dollar value totals from all pages. Write that number here: _____</p>							

Debtor 1

Carlos Dejuan Baker

Debtor 2

Gay Avery Baker

First Name Middle Name Last Name

Part 1: Additional Page After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion if any

2.5 **Nebraska Furniture Mart** Describe the property that secures the claim: \$4,719.13 \$3,262.96 \$1,456.17

Creditor's Name
Attn: Collections

PO Box 2335
Number Street

Omaha, NE 68103
City State ZIP Code

Who owes the debt? Check one.
 Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

Date debt was incurred 9/1/2021 **Last 4 digits of account number** 9 R E V

Remarks: In Plan

<u>2.6</u> NMAC Creditor's Name Attn: Bankruptcy	Describe the property that secures the claim: <u>\$54,829.33</u> <u>\$33,550.00</u> <u>\$21,279.33</u>

PO Box 660366
Number Street

Dallas, TX 75266-0366
City State ZIP Code

Who owes the debt? Check one.
 Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

Date debt was incurred 12/1/2021 **Last 4 digits of account number** 0 0 0 1

Remarks: Surrender

Add the dollar value of your entries in Column A on this page. Write that number here: \$59,548.46

If this is the last page of your form, add the dollar value totals from all pages.
Write that number here:

Debtor 1

Carlos Dejuan Baker

Debtor 2

Gay Avery Baker

First Name

Middle Name

Last Name

Part 1:	Additional Page After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.	Column A	Column B	Column C
		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any

2.7 South Pointe Estates Phase 3 HOA Describe the property that secures the claim: \$0.00 \$1,024,190.00 \$0.00

Creditor's Name
1100 Knoll Crest Dr

Number Street

Mansfield, TX 76063

City State ZIP Code

Who owes the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

Nature of lien. Check all that apply.

Contingent
 Unliquidated
 Disputed
 An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) _____

Date debt was incurred _____ Last 4 digits of account number _____

Remarks: In Plan

2.8 Tarrant County Tax Assessor/Collector Describe the property that secures the claim: \$17,106.35 \$1,024,190.00 \$0.00

Creditor's Name
Ron Wright, CTA

PO Box 961018

Number Street

Fort Worth, TX 76161-0018

City State ZIP Code

Who owes the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

Nature of lien. Check all that apply.

Contingent
 Unliquidated
 Disputed
 An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) _____

Date debt was incurred 1/1/2024 Last 4 digits of account number 2 3 6 5

Remarks: Pay Direct

Add the dollar value of your entries in Column A on this page. Write that number here: \$17,106.35

If this is the last page of your form, add the dollar value totals from all pages. Write that number here: _____

Debtor 1

Carlos Dejuan Baker

Debtor 2

Gay Avery Baker

First Name Middle Name Last Name

Part 1: Additional Page After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any

2.9 **Tax Finance LLC Formerly Titlemax** **Describe the property that secures the claim:** \$4,086.88 **\$3,650.00** **\$436.88**

Creditor's Name **2007 Toyota Camry**

15 Bull Street Suite 200
Number Street

Savannah, GA 31401-2686
City State ZIP Code

Who owes the debt? Check one.
 Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

Nature of lien. Check all that apply.
 Contingent
 Unliquidated
 Disputed
 An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) _____

Date debt was incurred _____ **Last 4 digits of account number** _____

Remarks: In Plan

2.10 **TD Auto Finance** **Describe the property that secures the claim:** \$80,840.12 **\$48,025.00** **\$32,815.12**

Creditor's Name **2020 Mercedes-Benz S560**

Attn: Bankruptcy

PO Box 9223
Number Street

Farmington Hills, MI 48333-9223
City State ZIP Code

Who owes the debt? Check one.
 Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

Nature of lien. Check all that apply.
 Contingent
 Unliquidated
 Disputed
 An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) _____

Date debt was incurred 12/13/2021 **Last 4 digits of account number** 1 4 2 0

Remarks: Surrender

Add the dollar value of your entries in Column A on this page. Write that number here:	<u>\$84,927.00</u>
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:	<u>\$865,211.59</u>

Fill in this information to identify your case:

Debtor 1	Carlos	Dejuan	Baker
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	Gay	Avery	Baker
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		Northern	District of Texas
Case number 24-44095-MXM-13 (if known)			

Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

No. Go to Part 2.
 Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

	Total claim	Priority amount	Nonpriority amount
	\$57,544.43	\$57,544.43	\$0.00

2.1	Internal Revenue Service Priority Creditor's Name	Last 4 digits of account number	_____	\$57,544.43	\$57,544.43	\$0.00
	Centralized Insolvency Operations	When was the debt incurred?	_____			
	PO Box 7346 Number Street Philadelphia, PA 19101-7346	As of the date you file, the claim is: Check all that apply.				
	City State ZIP Code	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed				
	Who incurred the debt? Check one.	Type of PRIORITY unsecured claim:				
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____				
	Check if this claim is for a community debt					
	Is the claim subject to offset?					
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes					
	Remarks: Pay Direct					

Debtor 1

Carlos Dejuan Baker

Debtor 2

Gay Avery Baker

First Name Middle Name Last Name

Part 1:

Your PRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.			Total claim	Priority amount	Nonpriority amount	
2.2	<u>Leinart Law Firm</u> Priority Creditor's Name <u>10670 N Central Expy Ste 320</u> Number Street	Last 4 digits of account number	<u> </u>	<u>\$3,900.00</u>	<u>\$3,900.00</u>	<u>\$0.00</u>
		When was the debt incurred?	<u>11/04/2024</u>			
	<u>Dallas, TX 75231-2173</u> City State ZIP Code	As of the date you file, the claim is: Check all that apply.				
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed				
	Who incurred the debt? Check one.	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another				
		Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input checked="" type="checkbox"/> Other. Specify <u>Attorney Fees</u>				
	Is the claim subject to offset?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

Debtor 1

Carlos Dejuan Baker

Debtor 2

Gay Avery Baker

First Name Middle Name Last Name

Part 2: List All of Your NONPRIORITY Unsecured Claims**3. Do any creditors have nonpriority unsecured claims against you?**

No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

			Total claim
4.1	Amex Nonpriority Creditor's Name <u>Correspondence/Bankruptcy</u>	Last 4 digits of account number <u>3 6 2 3</u>	<u>\$2,268.07</u>
	PO Box 981540 Number Street El Paso, TX 79998-1540	When was the debt incurred? <u>9/1/2022</u>	
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>	
	Is the claim subject to offset?		
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
4.2	Amex Nonpriority Creditor's Name <u>c/o Becket and Lee</u>	Last 4 digits of account number _____	<u>\$6,719.78</u>
	PO Box 3001 Number Street Malvern, PA 19355	When was the debt incurred? _____	
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Collection Agency</u>	
	Is the claim subject to offset?		
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor 1

Carlos Dejuan Baker

Debtor 2

Gay Avery Baker

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.3	Amex Nonpriority Creditor's Name c/o Becket and Lee	Last 4 digits of account number <u>1 0 0 3</u>	\$16,522.65
	PO Box 3001 Number Street Malvern, PA 19355	When was the debt incurred?	
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Collection Agency</u>	
	Is the claim subject to offset?		
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
4.4	Ashley Funding Servics, LLC Nonpriority Creditor's Name c/o Resurgent Capital Services	Last 4 digits of account number <u>7 2 1 0</u>	\$6.94
	PO Box 10587 Number Street Greenville, SC 29603-0587	When was the debt incurred?	
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Collecting for - Labcorp</u>	
	Is the claim subject to offset?		
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor 1

Carlos Dejuan Baker

Debtor 2

Gay Avery Baker

First Name Middle Name Last Name

Case number (if known) 24-44095-MXM-13**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.5	Bank of America	Last 4 digits of account number	<u>7 1 3 9</u>	\$2,042.00
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Nonpriority Creditor's Name

Attn: Bankruptcy**4909 Savarese Circle**

Number Street

Tampa, FL 33634

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify CreditCard

Is the claim subject to offset?

No
 Yes

4.6	Capital One	Last 4 digits of account number	<u>4 0 3 0</u>	\$4,591.01
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Nonpriority Creditor's Name

Attn: Bankruptcy**PO Box 30285**

Number Street

Salt Lake City, UT 84130-0285

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify CreditCard

Is the claim subject to offset?

No
 Yes

Debtor 1

Carlos Dejuan Baker

Debtor 2

Gay Avery Baker

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.9	Chase Card Services Nonpriority Creditor's Name Attn: Bankruptcy	Last 4 digits of account number	<u>9 9 4 1</u>	\$1,268.00
	P.O. 15298 Number Street Wilmington, DE 19850	When was the debt incurred?	<u>7/1/2016</u>	
	City State ZIP Code	As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt	Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.10	Citibank Nonpriority Creditor's Name Citicorp Cr Svrs/Centralized Bankruptcy	Last 4 digits of account number	<u>9 4 5 9</u>	\$0.00
	PO Box 790040 Number Street St Louis, MO 63179-0040	When was the debt incurred?	<u>3/24/2016</u>	
	City State ZIP Code	As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt	Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>UnknownLoanType</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1

Carlos Dejuan Baker

Debtor 2

Gay Avery Baker

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.11	Citibank/Best Buy Nonpriority Creditor's Name <u>Citicorp Cr Svrs/Centralized Bankruptcy</u>	Last 4 digits of account number	<u>0 5 9 7</u>	<u>\$0.00</u>
	PO Box 790040 Number Street St Louis, MO 63179-0040	When was the debt incurred?	<u>7/1/2011</u>	
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.		
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:		
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>ChargeAccount</u>		
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.12	Citibank/Exxon Mobile Nonpriority Creditor's Name <u>Citicorp Cr Svrs/Centralized Bankruptcy</u>	Last 4 digits of account number	<u>6 8 0 0</u>	<u>\$393.00</u>
	PO Box 790040 Number Street St Louis, MO 63179-0040	When was the debt incurred?	<u>5/16/1987</u>	
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.		
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:		
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>		
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1

Carlos Dejuan Baker

Debtor 2

Gay Avery Baker

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.13 <u>Comenity Bank/Ann Taylor</u> Nonpriority Creditor's Name <u>Attn: Bankruptcy</u> <u>PO Box 182125</u> Number Street <u>Columbus, OH 43218</u> City State ZIP Code	Last 4 digits of account number <u>9 5 1 8</u> When was the debt incurred? <u>6/1/2022</u>	<u>\$0.00</u>
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>ChargeAccount</u>		
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
4.14 <u>Conn's HomePlus</u> Nonpriority Creditor's Name <u>2445 Technology Forest Boulevard Building 4, Suite 800</u> Number Street <u>The Woodlands, TX 77381</u> City State ZIP Code		
Last 4 digits of account number <u>4 5 3 6</u> When was the debt incurred? <u>8/1/2012</u>		
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____		
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor 1

Carlos Dejuan Baker

Debtor 2

Gay Avery Baker

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.15 Costco Citi Card Last 4 digits of account number 9 3 5 8 \$1,158.40

Nonpriority Creditor's Name

Attn: BankruptcyPO Box 6500

Number Street

Sioux Falls, SD 57117

City State ZIP Code

When was the debt incurred? 7/1/2014

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify CreditCard

Is the claim subject to offset?

No
 Yes

4.16 Dsnb Bloomingdales Last 4 digits of account number 6 5 6 1 \$0.00

Nonpriority Creditor's Name

Attn: BankruptcyPO Box 8053

Number Street

Mason, OH 45040

City State ZIP Code

When was the debt incurred? 1/1/2014

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify ChargeAccount

Is the claim subject to offset?

No
 Yes

Debtor 1

Carlos Dejuan Baker

Debtor 2

Gay Avery Baker

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.17 <u>Fort Worth Community Credit Union</u> Nonpriority Creditor's Name <u>Attn: Bankruptcy</u>	Last 4 digits of account number <u>0 1 4 5</u> When was the debt incurred? <u>9/1/2015</u>	\$0.00
1905 Forest Ridge Drive Number Street Bedford, TX 76021 City State ZIP Code		
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Unsecured</u>		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
4.18 <u>Haverty's Credit Services</u> Nonpriority Creditor's Name <u>Attn: Bankruptcy</u>		
Last 4 digits of account number <u>7 8 6 3</u> When was the debt incurred? <u>6/1/2012</u>		
PO Box 5787 Number Street Chattanooga, TN 37406 City State ZIP Code		
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>ChargeAccount</u>		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor 1

Carlos Dejuan Baker

Debtor 2

Gay Avery Baker

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation PageAfter listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim

4.21 <u>Kingston Data and Credit International</u> Nonpriority Creditor's Name <u>Attn: Bankruptcy</u> <u>Attn: Bankruptcy</u> <u>1301 Seminole Blvd , Unit 166,</u> Number Street <u>Largo, FL 33770</u> City State ZIP Code	Last 4 digits of account number <u>1 5 2 7</u> When was the debt incurred? <u>3/27/2023</u>	<u>\$373.00</u>
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>UnknownLoanType</u>		
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
4.22 <u>Kohl's</u> Nonpriority Creditor's Name <u>Attn: Credit Administrator</u> <u>PO Box 3043</u> Number Street <u>Milwaukee, WI 53201-3043</u> City State ZIP Code		
Last 4 digits of account number <u>9 9 9 2</u> When was the debt incurred? <u>12/1/2021</u>		
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>ChargeAccount</u>		
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor 1

Carlos Dejuan Baker

Debtor 2

Gay Avery Baker

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.23 <u>Labcorp</u> Nonpriority Creditor's Name PO Box 2240 Number Street Burlington, NC 27216 City State ZIP Code	Last 4 digits of account number <u>7 2 1 0</u> When was the debt incurred?	As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt		Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Medical Bill</u>
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
4.24 <u>LVNV/Resurgent Capital Services</u> Nonpriority Creditor's Name PO Box 10587 Number Street Greenville, SC 29603-0587 City State ZIP Code		Last 4 digits of account number <u> </u> When was the debt incurred?
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt		As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Collecting for - Synchrony/Sams Club</u>		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor 1

Carlos Dejuan Baker

Debtor 2

Gay Avery Baker

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.25	LVNV/Resurgent Capital Services	Last 4 digits of account number	<u> </u>	<u>\$1,353.86</u>
Nonpriority Creditor's Name		When was the debt incurred?		
PO Box 10587				
Number	Street	As of the date you file, the claim is: Check all that apply.		
Greenville, SC 29603-0587		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
City	State	ZIP Code		
Who incurred the debt? Check one.				
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt				
Type of NONPRIORITY unsecured claim:				
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Collecting for - Synchrony/TJX</u>				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
4.26	LVNV/Resurgent Capital Services	Last 4 digits of account number	<u> </u>	<u>\$4,269.52</u>
Nonpriority Creditor's Name		When was the debt incurred?		
PO Box 10587				
Number	Street	As of the date you file, the claim is: Check all that apply.		
Greenville, SC 29603-0587		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
City	State	ZIP Code		
Who incurred the debt? Check one.				
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt				
Type of NONPRIORITY unsecured claim:				
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Collecting for - Synchrony/Paypal</u>				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

Debtor 1

Carlos Dejuan Baker

Debtor 2

Gay Avery Baker

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.27 NMAC Nonpriority Creditor's Name Attn: Bankruptcy	Last 4 digits of account number <u>8 1 0 9</u> When was the debt incurred? <u>8/23/2014</u>	\$7,845.00
PO Box 660360 Number Street Dallas, TX 75266-0360 City State ZIP Code		
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>AutoLease</u>		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
4.28 Nordstrom FSB Nonpriority Creditor's Name ATTN: Bankruptcy		
Last 4 digits of account number <u>3 0 1 7</u> When was the debt incurred? <u>9/1/2014</u> \$65.00		
PO Box 6555 Number Street Englewood, CO 80155-6555 City State ZIP Code		
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor 1

Carlos Dejuan Baker

Debtor 2

Gay Avery Baker

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.29 <u>Porsche Financial Srvc</u> Nonpriority Creditor's Name <u>Attn: Bankruptcy</u>	Last 4 digits of account number <u>7 1 7 6</u> When was the debt incurred? <u>10/25/2014</u>	<u>\$0.00</u>
One Porsche Dr Number Street <u>Atlanta, GA 30354</u> City State ZIP Code		
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>AutoLease</u>		
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
4.30 <u>Santander Consumer USA, Inc</u> Nonpriority Creditor's Name <u>Attn: Bankruptcy</u>		
Last 4 digits of account number <u>1 0 0 0</u> When was the debt incurred? <u>4/1/2018</u>		
PO Box 961245 Number Street <u>Fort Worth, TX 76161-1245</u> City State ZIP Code		
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____		
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor 1

CarlosDejuanBaker

Debtor 2

GayAveryBaker

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

<p>4.31 <u>Small Business Administration</u></p> <p>Nonpriority Creditor's Name 409 3rd St. SW</p> <p>Number Street</p> <p>Washington, DC 20416</p> <p>City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u> </u> \$539,890.10</p> <p>When was the debt incurred? <u> </u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Personal Loan</u></p>
<p>4.32 <u>Synchrony Bank</u></p> <p>Nonpriority Creditor's Name Attn: Bankruptcy</p> <p>PO Box 965060</p> <p>Number Street</p> <p>Orlando, FL 32896-5060</p> <p>City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	
<p>Last 4 digits of account number <u>0 6 4 3</u> \$2,737.00</p> <p>When was the debt incurred? <u>7/1/2021</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>ChargeAccount</u></p>	

Debtor 1

Carlos Dejuan Baker

Debtor 2

Gay Avery Baker

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.33 Synchrony Bank/Amazon Nonpriority Creditor's Name Attn: Bankruptcy PO Box 965060 Number Street Orlando, FL 32896-5060 City State ZIP Code	Last 4 digits of account number <u>2 7 0 8</u> When was the debt incurred? <u>4/20/2014</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>ChargeAccount</u>	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.34 Synchrony Bank/Discount Tire Nonpriority Creditor's Name Attn: Bankruptcy PO Box 965060 Number Street Orlando, FL 32896-5060 City State ZIP Code			
Last 4 digits of account number <u>5 7 0 7</u> When was the debt incurred? <u>11/5/2014</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$0.00	
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>ChargeAccount</u>	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1

Carlos Dejuan Baker

Debtor 2

Gay Avery Baker

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.35 <u>Synchrony Bank/JCPenney</u> Nonpriority Creditor's Name Attn: Bankruptcy PO Box 965060 Number Street Orlando, FL 32896-5060 City State ZIP Code	Last 4 digits of account number <u>6 8 1 0</u> When was the debt incurred? <u>4/25/1992</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>ChargeAccount</u>	<u>\$0.00</u>
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
4.36 <u>Synchrony Bank/Lowes</u> Nonpriority Creditor's Name Attn: Bankruptcy PO Box 965060 Number Street Orlando, FL 32896-5060 City State ZIP Code		
Last 4 digits of account number <u>5 0 1 9</u> When was the debt incurred? <u>3/1/2014</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>ChargeAccount</u>		
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor 1

Carlos Dejuan Baker

Debtor 2

Gay Avery Baker

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.37	Synchrony Bank/Sams Club Nonpriority Creditor's Name Attn: Bankruptcy	Last 4 digits of account number	<u>3</u> <u>0</u> <u>2</u> <u>7</u>	\$2,505.00
	PO Box 965060 Number Street Orlando, FL 32896-5060	When was the debt incurred?	<u>12/1/2022</u>	
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.		
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:		
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>		
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.38	Synchrony Bank/TJX Nonpriority Creditor's Name Attn: Bankruptcy	Last 4 digits of account number	<u>2</u> <u>3</u> <u>8</u> <u>9</u>	\$1,353.00
	PO Box 965060 Number Street Orlando, FL 32896	When was the debt incurred?	<u>11/1/2021</u>	
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.		
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:		
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>		
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1

Carlos Dejuan Baker

Debtor 2

Gay Avery Baker

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.39 <u>Synchrony/PayPal Credit</u> Nonpriority Creditor's Name Attn: Bankruptcy PO Box 965060 Number Street Orlando, FL 32896-5060 City State ZIP Code	Last 4 digits of account number <u>1 4 2 6</u> When was the debt incurred? <u>8/1/2022</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Total claim <u>\$4,269.00</u>
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		
Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
4.40 <u>Timepayment Corp, LLC.</u> Nonpriority Creditor's Name Attn: Bankruptcy Dept 200 Summit Drive , Suite 100 Number Street Burlington, MA 01803 City State ZIP Code		
Last 4 digits of account number <u>7 7 9 5</u> When was the debt incurred? <u>9/1/2016</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		
Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>RentalAgreement</u>		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor 1

CarlosDejuanBaker

Debtor 2

GayAveryBaker

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.43 Vivint Home Security

Nonpriority Creditor's Name

4931 North 300 West

Number Street

Last 4 digits of account number \$1.00When was the debt incurred? **Provo, UT 84604**

City State

ZIP Code

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify

Is the claim subject to offset?

No
 Yes

4.44 Wells Fargo Bank NA

Nonpriority Creditor's Name

Attn: Bankruptcy**1 Home Campus MAC X2303-01A 3rd Floor**

Number Street

Des Moines, IA 50328

City State

Last 4 digits of account number 2 4 4 9\$0.00When was the debt incurred? 1/1/2015

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify ChargeAccount

Is the claim subject to offset?

No
 Yes

Debtor 1

Carlos Dejuan Baker

Debtor 2

Gay Avery Baker

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.45	Wells Fargo Dealer Services	Last 4 digits of account number	<u>2</u> <u>3</u> <u>8</u> <u>1</u>	<u>\$0.00</u>
Nonpriority Creditor's Name		When was the debt incurred?		
<u>Attn: Bankruptcy</u>		<u>10/1/2012</u>		
1100 Corporate Center Drive		As of the date you file, the claim is: Check all that apply.		
Number	Street	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Raleigh, NC 27607		<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____		
City	State	ZIP Code		
Who incurred the debt? Check one.				
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt				
Type of NONPRIORITY unsecured claim:				
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
4.46	Wells Fargo/Dillard	Last 4 digits of account number	<u>9</u> <u>5</u> <u>6</u> <u>0</u>	<u>\$8,089.59</u>
Nonpriority Creditor's Name		When was the debt incurred?		
<u>Attn: Bankruptcy</u>		<u>1/1/2014</u>		
1 Home Campus MAC X2303-01A 3rd FL		As of the date you file, the claim is: Check all that apply.		
Number	Street	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Des Moines, IA 50328		<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>		
City	State	ZIP Code		
Who incurred the debt? Check one.				
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt				
Type of NONPRIORITY unsecured claim:				
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

Debtor 1

Carlos Dejuan Baker

Debtor 2

Gay Avery Baker

First Name Middle Name Last Name

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159.
Add the amounts for each type of unsecured claim.

		Total claim
Total claims from Part 1	6a. Domestic support obligations	6a. <u>\$0.00</u>
	6b. Taxes and certain other debts you owe the government	6b. <u>\$57,544.43</u>
	6c. Claims for death or personal injury while you were intoxicated	6c. <u>\$0.00</u>
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + <u>\$3,900.00</u>
	6e. Total. Add lines 6a through 6d.	<u>\$61,444.43</u>

		Total claim
Total claims from Part 2	6f. Student loans	6f. <u>\$0.00</u>
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. <u>\$0.00</u>
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. <u>\$0.00</u>
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + <u>\$625,903.20</u>
	6j. Total. Add lines 6f through 6i.	<u>\$625,903.20</u>

Fill in this information to identify your case:

Debtor 1	Carlos	Dejuan	Baker
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	Gay	Avery	Baker
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	Northern District of Texas		
Case number (if known)	24-44095-MXM-13		

Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease			State what the contract or lease is for
2.1	Name			
	Number	Street		
	City	State	ZIP Code	
2.2	Name			
	Number	Street		
	City	State	ZIP Code	
2.3	Name			
	Number	Street		
	City	State	ZIP Code	
2.4	Name			
	Number	Street		
	City	State	ZIP Code	

Fill in this information to identify your case:

Debtor 1	Carlos	Dejuan	Baker
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	Gay	Avery	Baker
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		Northern	District of Texas
Case number 24-44095-MXM-13 (if known)			

Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. **Do you have any codebtors?** (If you are filing a joint case, do not list either spouse as a codebtor.)

No
 Yes

2. **Within the last 8 years, have you lived in a community property state or territory?** (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No. Go to line 3.
 Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

No

Yes. In which community state or territory did you live? **Texas**. Fill in the name and current address of that person.

Baker, Gay Avery

Name of your spouse, former spouse, or legal equivalent

1401 Hackney Dr

Number Street

Mansfield, TX 76063

City State ZIP Code

Yes. In which community state or territory did you live? **Texas**. Fill in the name and current address of that person.

Baker, Carlos Dejuan

Name of your spouse, former spouse, or legal equivalent

1401 Hackney Dr

Number Street

Mansfield, TX 76063

City State ZIP Code

3. **In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.**

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.1

Name

Schedule D, line _____

Number

Schedule E/F, line _____

Street

Schedule G, line _____

City

State

ZIP Code

Debtor 1

Carlos Dejuan Baker

Debtor 2

Gay Avery Baker

First Name Middle Name Last Name

Additional Page to List More Codebtors

Column 1: Your codebtor**Column 2: The creditor to whom you owe the debt**

Check all schedules that apply:

3.2

Name

 Schedule D, line _____

Number Street

 Schedule E/F, line _____

City State ZIP Code

 Schedule G, line _____

Fill in this information to identify your case:

Debtor 1	Carlos	Dejuan	Baker
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	Gay	Avery	Baker
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	Northern District of Texas		
Case number (if known)	24-44095-MXM-13		

Check if this is:

An amended filing
 A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

	Debtor 1	Debtor 2 or non-filing spouse
Employment status	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not Employed	<input type="checkbox"/> Employed <input checked="" type="checkbox"/> Not Employed
Occupation	Forklift Operator	Unemployed
Employer's name	Siemens Industry Inc.	
Employer's address	1000 Deerfield Pkwy Number Street	
	Buffalo Grove, IL 60089 City State Zip Code	
How long employed there?	1 year 2 months	

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be.	2. <u>\$6,992.31</u>	<u>\$0.00</u>
3. Estimate and list monthly overtime pay.	3. + <u>\$0.00</u>	+ <u>\$0.00</u>
4. Calculate gross income. Add line 2 + line 3.	4. <u>\$6,992.31</u>	<u>\$0.00</u>

Debtor 1
Debtor 2

First Name	Carlos Gay	Middle Name	Dejuan Avery	Last Name	Baker Baker
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Case number (if known) 24-44095-MXM-13

		For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here.....	→	4. <u>\$6,992.31</u>	<u>\$0.00</u>
5. List all payroll deductions:		5a. <u>\$988.00</u>	<u>\$0.00</u>
5b. Mandatory contributions for retirement plans		5b. <u>\$0.00</u>	<u>\$0.00</u>
5c. Voluntary contributions for retirement plans		5c. <u>\$416.52</u>	<u>\$0.00</u>
5d. Required repayments of retirement fund loans		5d. <u>\$0.00</u>	<u>\$0.00</u>
5e. Insurance		5e. <u>\$522.47</u>	<u>\$0.00</u>
5f. Domestic support obligations		5f. <u>\$0.00</u>	<u>\$0.00</u>
5g. Union dues		5g. <u>\$0.00</u>	<u>\$0.00</u>
5h. Other deductions. Specify: _____		5h. + <u>\$0.00</u>	+ <u>\$0.00</u>
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.		6. <u>\$1,926.99</u>	<u>\$0.00</u>
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.		7. <u>\$5,065.32</u>	<u>\$0.00</u>
8. List all other income regularly received:			
8a. Net income from rental property and from operating a business, profession, or farm		8a. <u>\$0.00</u>	<u>\$5,000.00</u>
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.			
8b. Interest and dividends		8b. <u>\$0.00</u>	<u>\$0.00</u>
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive		8c. <u>\$0.00</u>	<u>\$0.00</u>
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.			
8d. Unemployment compensation		8d. <u>\$0.00</u>	<u>\$0.00</u>
8e. Social Security		8e. <u>\$0.00</u>	<u>\$0.00</u>
8f. Other government assistance that you regularly receive		8f. <u>\$0.00</u>	<u>\$0.00</u>
Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.			
Specify: _____			
8g. Pension or retirement income		8g. <u>\$0.00</u>	<u>\$0.00</u>
8h. Other monthly income. Specify: _____		8h. + <u>\$0.00</u>	+ <u>\$0.00</u>
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.		9. <u>\$0.00</u>	<u>\$5,000.00</u>
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse		10. <u>\$5,065.32</u>	+ <u>\$5,000.00</u> = <u>\$10,065.32</u>
11. State all other regular contributions to the expenses that you list in Schedule J.			
Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.			
Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.			
Specify: _____		11. + <u>\$0.00</u>	
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Your Assets and Liabilities and Certain Statistical Information</i> , if it applies		12. <u>\$10,065.32</u>	
13. Do you expect an increase or decrease within the year after you file this form?			
<input type="checkbox"/> No.		Joint Debtor is about to start a part time job.	
<input checked="" type="checkbox"/> Yes. Explain:		_____	
		Combined monthly income	

Debtor 1
Debtor 2

Carlos Gay	Dejuan Avery	Baker Baker
First Name	Middle Name	Last Name

Case number (if known) 24-44095-MXM-13

1. Employment information for Debtor 1

Occupation Package Handler

Employer's name FedEx Corporation

Employer's address 942 South Shady Grove Road
Number Street

Memphis, TN 38120

City State Zip Code

How long employed there? 8 months

Debtor 1
Debtor 2

First Name	Carlos Gay	Middle Name	Dejuan Avery	Last Name	Baker Baker
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Case number (if known) 24-44095-MXM-13

8a. Attached Statement

Business Income

FINANCIAL REVIEW OF THE DEBTOR'S BUSINESS (NOTE: ONLY INCLUDE information directly related to the business operation.)

PART A - ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCOME:

1. Gross Monthly Income: **\$5,000.00**

PART B - ESTIMATED AVERAGE FUTURE MONTHLY EXPENSES:

2. Payments to be Made Directly by Debtor to Secured Creditors for Pre-Petition Business Debts

TOTAL PAYMENTS TO SECURED CREDITORS **\$0.00**

3. Other Expenses

TOTAL OTHER EXPENSES **\$0.00**

4. TOTAL MONTHLY EXPENSES(Add item 2 - 21)

PART C - ESTIMATED AVERAGE NET MONTHLY INCOME:

5. AVERAGE NET MONTHLY INCOME(Subtract item 22 from item 1) **\$5,000.00**

Fill in this information to identify your case:

Debtor 1	Carlos First Name	Dejuan Middle Name	Baker Last Name
Debtor 2 (Spouse, if filing)	Gay First Name	Avery Middle Name	Baker Last Name
United States Bankruptcy Court for the:	Northern District of Texas		
Case number (if known)	24-44095-MXM-13		

Check if this is:

An amended filing
 A supplement showing postpetition chapter 13 expenses as of the following date:

 MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

No. Go to line 2.
 Yes. Does Debtor 2 live in a separate household?
 No
 Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

2. Do you have dependents?

No

Do not list Debtor 1 and Debtor 2.

Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

Do not state the dependents' names.

_____	_____	<input type="checkbox"/> No. <input type="checkbox"/> Yes.
_____	_____	<input type="checkbox"/> No. <input type="checkbox"/> Yes.
_____	_____	<input type="checkbox"/> No. <input type="checkbox"/> Yes.
_____	_____	<input type="checkbox"/> No. <input type="checkbox"/> Yes.
_____	_____	<input type="checkbox"/> No. <input type="checkbox"/> Yes.

3. Do your expenses include expenses of people other than yourself and your dependents?

No

Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I).

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. _____ \$0.00

If not included in line 4:

4a. Real estate taxes
 4b. Property, homeowner's, or renter's insurance
 4c. Home maintenance, repair, and upkeep expenses
 4d. Homeowner's association or condominium dues

4a. _____	\$0.00
4b. _____	\$0.00
4c. _____	\$75.00
4d. _____	\$0.00

Debtor 1
Debtor 2

Carlos Gay	Dejuan Avery	Baker Baker
First Name	Middle Name	Last Name

Case number (if known) 24-44095-MXM-13

		Your expenses
5.	Additional mortgage payments for your residence , such as home equity loans	5. <u>\$0.00</u>
6.	Utilities:	
6a.	Electricity, heat, natural gas	6a. <u>\$150.00</u>
6b.	Water, sewer, garbage collection	6b. <u>\$191.00</u>
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c. <u>\$200.00</u>
6d.	Other. Specify: <u>Cable/Internet</u>	6d. <u>\$210.00</u>
7.	Food and housekeeping supplies	7. <u>\$300.00</u>
8.	Childcare and children's education costs	8. <u>\$0.00</u>
9.	Clothing, laundry, and dry cleaning	9. <u>\$50.00</u>
10.	Personal care products and services	10. <u>\$50.00</u>
11.	Medical and dental expenses	11. <u>\$100.00</u>
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12. <u>\$300.00</u>
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13. <u>\$0.00</u>
14.	Charitable contributions and religious donations	14. <u>\$0.00</u>
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.	
15a.	Life insurance	15a. <u>\$0.00</u>
15b.	Health insurance	15b. <u>\$0.00</u>
15c.	Vehicle insurance	15c. <u>\$300.00</u>
15d.	Other insurance. Specify: _____	15d. <u>\$0.00</u>
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16. <u>\$0.00</u>
17.	Installment or lease payments:	
17a.	Car payments for Vehicle 1	17a. <u>\$0.00</u>
17b.	Car payments for Vehicle 2	17b. <u>\$0.00</u>
17c.	Other. Specify: _____	17c. <u>\$0.00</u>
17d.	Other. Specify: _____	17d. <u>\$0.00</u>
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18. <u>\$0.00</u>
19.	Other payments you make to support others who do not live with you. Specify: _____	19. <u>\$0.00</u>
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	
20a.	Mortgages on other property	20a. <u>\$0.00</u>
20b.	Real estate taxes	20b. <u>\$0.00</u>
20c.	Property, homeowner's, or renter's insurance	20c. <u>\$0.00</u>
20d.	Maintenance, repair, and upkeep expenses	20d. <u>\$0.00</u>
20e.	Homeowner's association or condominium dues	20e. <u>\$0.00</u>

Debtor 1
Debtor 2

First Name	Middle Name	Last Name
Carlos Gay	Dejuan Avery	Baker Baker

Case number (if known) **24-44095-MXM-13**

21. **Other.** Specify: _____

21. + **\$0.00**

22. **Calculate your monthly expenses.**

22a. Add lines 4 through 21.

22a. **\$1,926.00**

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22b. **\$0.00**

22c. Add line 22a and 22b. The result is your monthly expenses.

22c. **\$1,926.00**

23. **Calculate your monthly net income.**

23a. Copy line 12 (your combined monthly income) from *Schedule I*.

23a. **\$10,065.32**

23b. Copy your monthly expenses from line 22c above.

23b. - **\$1,926.00**

23c. Subtract your monthly expenses from your monthly income.

The result is your *monthly net income*.

23c. **\$8,139.32**

24. **Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

None

Yes.

Fill in this information to identify your case:

Debtor 1	Carlos First Name	Dejuan Middle Name	Baker Last Name
Debtor 2 (Spouse, if filing)	Gay First Name	Avery Middle Name	Baker Last Name
United States Bankruptcy Court for the:	Northern District of Texas		
Case number (if known)	24-44095-MXM-13		

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new **Summary** and check the box at the top of this page.

Part 1: Summarize Your Assets

Your assets

Value of what you own

1. Schedule A/B: Property (Official Form 106A/B)

1a. Copy line 55, Total real estate, from <i>Schedule A/B</i>	\$1,024,190.00
1b. Copy line 62, Total personal property, from <i>Schedule A/B</i>	\$186,318.86
1c. Copy line 63, Total of all property on <i>Schedule A/B</i>	\$1,210,508.86

Part 2: Summarize Your Liabilities

Your liabilities

Amount you owe

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)

2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i>	\$865,211.59
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3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)

3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>	\$61,444.43
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	+ \$625,903.20

Your total liabilities

\$1,552,559.22

Part 3: Summarize Your Income and Expenses

4. Schedule I: Your Income (Official Form 106I)

Copy your combined monthly income from line 12 of <i>Schedule I</i>	\$10,065.32
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5. Schedule J: Your Expenses (Official Form 106J)

Copy your monthly expenses from line 22c of <i>Schedule J</i>	\$1,926.00
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Debtor 1
Debtor 2

First Name	Middle Name	Last Name
Carlos Gay	Dejuan Avery	Baker Baker

Case number (if known) 24-44095-MXM-13

Part 4: Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
 Yes

7. What kind of debt do you have?

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
 Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the **Statement of Your Current Monthly Income**: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$4,554.48

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Total claim

From Part 4 on Schedule E/F, copy the following:

9a. Domestic support obligations (Copy line 6a.) \$0.00

9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$57,544.43

9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00

9d. Student loans. (Copy line 6f.) \$0.00

9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$0.00

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) + \$0.00

9g. **Total**. Add lines 9a through 9f. \$57,544.43

Fill in this information to identify your case:

Debtor 1	<u>Carlos</u>	<u>Dejuan</u>	<u>Baker</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Gay</u>	<u>Avery</u>	<u>Baker</u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Northern District of Texas</u>		
Case number (if known)	<u>24-44095-MXM-13</u>		

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No
 Yes. Name of person _____ Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)*.

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Carlos Dejuan Baker
Carlos Dejuan Baker, Debtor 1

Date 11/22/2024
MM/ DD/ YYYY

X /s/ Gay Avery Baker
Gay Avery Baker, Debtor 2

Date 11/22/2024
MM/ DD/ YYYY